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CONFIRMATION NO. 6456

|                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
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| <b>SERIAL NUMBER</b><br>10/747,823                                                                                                                                                                                                                                                                                                                      | <b>FILING OR 371(c) DATE</b><br>12/29/2003<br><b>RULE</b>                                                         | <b>CLASS</b><br>379           | <b>GROUP ART UNIT</b><br>2614                                                                                                                                                                                                                                                   | <b>ATTORNEY DOCKET NO.</b><br>190250-1360 |                                |
| <b>APPLICANTS</b><br>Mary S. Arnoff, Lawrenceville, GA;<br>W. Todd Daniell, Marietta, GA;<br>Larry G. Kent JR., Loganville, GA;<br>Dale W. Malik, Dunwoody, GA;      OA                                                                                                                                                                                 |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
| <b>** CONTINUING DATA *****</b><br>NONE OA                                                                                                                                                                                                                                                                                                              |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>NONE OA                                                                                                                                                                                                                                                                                                         |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 04/12/2004</b>                                                                                                                                                                                                                                                                              |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and      Allowance      Annulment      OA<br>Acknowledged      Examiner's Signature      Initials |                                                                                                                   | <b>STATE OR COUNTRY</b><br>GA | <b>SHEETS DRAWING</b><br>31                                                                                                                                                                                                                                                     | <b>TOTAL CLAIMS</b><br>26                 | <b>INDEPENDENT CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>38823                                                                                                                                                                                                                                                                                                                                 |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
| <b>TITLE</b><br>Substantially synchronous deposit of messages into multiple communication modalities                                                                                                                                                                                                                                                    |                                                                                                                   |                               |                                                                                                                                                                                                                                                                                 |                                           |                                |
| <b>FILING FEE RECEIVED</b><br>1050                                                                                                                                                                                                                                                                                                                      | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                           |                                |